

07-02-04

2673
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/993,394
		Filing Date	November 22, 2001
		First Named Inventor	Taylor et al.
		Group Art Unit	2673
		Examiner Name	CHANG, Kent Wu
Total Number of Pages in This Submission (including this sheet)	4	Attorney Docket No.	0837.CIRQ.NP

ENCLOSURES (check all that apply)			
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Check in the amount of \$___ <input checked="" type="checkbox"/> Credit card authorization in the amount of \$ <u>950.00</u> <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings ___ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input checked="" type="checkbox"/> Extension of Time Request <u>3rd</u> month <input checked="" type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Maintenance Fee Transmittal ___ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Other:	
Remarks			
<div style="text-align: right;">RECEIVED JUL 1 2 2004 Technology Center 2600</div>			
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Attorney for Applicant	David W. O'Bryant, Registration No. 39,793 MORRISS O'BRYANT COMPAGNI, P.C. 136 South Main Street, Suite 700 Salt Lake City, Utah 84101 (801) 478-0071 telephone; (801) 478-0076 facsimile		
Signature		Date	7/1/04
CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.10			
I hereby certify that the items listed above in this transmittal sheet are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. EXPRESS MAIL LABEL NO. EV 478757505 US			
Typed or Printed Name	David W. O'Bryant		
Signature		Date	7/1/04

FEE TRANSMITTAL

for FY 2004

Patent fees are subject to annual revision.

Complete if Known

Application Number 09/993,394
 Filing Date November 22, 2001
 First Named Inventor Taylor et al.
 Examiner Name CHANG, Kent Wu
 Group Art Unit 2673
 Attorney Docket No. 0837.CIRQ.CN

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JUL 12 2004

Technology Center 2600

TOTAL AMOUNT OF PAYMENT

(\$ 950.00)

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account

50-0881

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s)☐ Charge fee(s) indicated below, except the filing fee to the above-identified

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims		X	
Independent		X	
Multiple Dependent			

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$).00

FEE CALCULATION (continued)

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	950.00
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR §1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify)					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					(\$)950.00

Name (Print/Type)

David W. O'Bryen

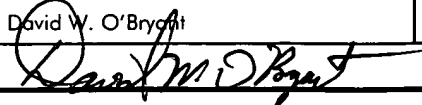
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Date

7/1/04